L23000089060

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

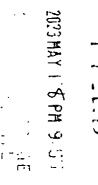




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COVER LETTER

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	Registration Sc Division of Cor					
SUBJEC		IA CAPITAL LLC				
SUBJEC	Name of Limited Liability Company					
The encid	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		VIRENDER SINGH CHA	UHAN			
			Name of Person			
			Firm/Company			
		2640 BELLEWATER PLA	ACE			
			Address			
		OVIEDO FL 32765				
		City/State and Zip Code				
		ehauhan.vir@gmail.com E-mail address: t	to be used for future annual report noti-	fication)		
For furth	er information c	concerning this matter, please c				
VIREND	DER SINGH CI	IAUHAN	678 3866141 at ()			
	Name o	of Person		e Telephone Number		
Enclosed	is a check for the	he following amount:				
□ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section		<u>Street Address:</u> Registration Sec	ction			
Division of Corporations		Division of Corporations				
	P.O. Box 632 Tallahassee,		The Centre of T 2415 N. Monro	allahassee e Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ASVATTHA CAPITAL LLC		
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records.) .iability Company)	
he Articles of Organization for this Limited Liability Company	were filed on <u>02/20/2023</u>	and assigned
lorida document number 123000089060		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
ASHVATTHA CAPITAL LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		7023 HAY
		OÁ !
Enter new mailing address, if applicable:		7 77
Mailing address MAY BE A POST OFFICE BOX)		
		<u></u>
		123 , -,
If amending the registered agent and/or registered office : igent and/or the new registered office address here;	address on our records, enter th	e name of the new registere
general de la company de la co		
Name of New Registered Agent:	···	
New Registered Office Address:		
	Enter Florida street address	
	Flori	da
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Remove
			Change
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			□Add
			□Remove
			TChange

Page 2 of 3 Val

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	06/21/2023
(If`an et <u>Note:</u>	(optional) fective date, if other than the date of filing:
The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of a 90th day after the record is filed.
Datec	0\$16 (May 16) 2023 (NO 1-
	Signsture of a member or authorized representative of a member
	organisation a member of authorized representative of a member

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